



## Collaborative Presentation Application

Name of  
Presenter: \_\_\_\_\_ Phone: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Which collaborative meeting will you present at?

☐ High Desert Partnership for Kids

☐ East Valley Collaborative

☐ Big Bear Collaborative

☐ Focus West

Please indicate which month you would like to  
present: \_\_\_\_\_

Please describe your program and presentation talking points. **In order to provide ample time for reports and roundtable we request that all local presentations be 15- 20 minutes in length.**

Terms of presentation:

1. The agency is responsible for setting up at the facility for the session 20 minutes prior to start of meeting.
2. The agency is responsible for providing equipment related to their presentation/meeting, such as audio/visual equipment or special room requirements.

I, \_\_\_\_\_ (print name), of  
\_\_\_\_\_ (print agency) have received, read and agree to  
abide by the presentation guidelines as listed on this form, and take responsibility to inform  
others coming to the event of these terms.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date